

## Supplemental Application Data Sheet

### Application Information



Application Serial No:: 10/716,936  
Filing Date:: 11/20/2003  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Computer Readable Form (CRF)?:: No  
Title:: PHOSPHOSPECIFIC PAK ANTIBODIES  
AND DIAGNOSTIC KITS  
Attorney Docket Number:: 034536-0220  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 2  
Small Entity?:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.?:: No

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Tod R.  
Family Name:: Smeal  
City of Residence:: San Francisco

**State or Province of** CA  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 801 Corbett Street, Apt. 9  
**City of mailing address::** San Francisco  
**State or Province of mailing address::** CA  
**Postal or Zip Code of mailing address::** 94131

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Australia  
**Status::** Full Capacity  
**Given Name::** Marinella G.  
**Family Name::** Callow  
**City of Residence::** Redwood City  
**State or Province of** CA  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 3 Batten Lane  
**City of mailing address::** Redwood City  
**State or Province of mailing address::** CA  
**Postal or Zip Code of mailing address::** 94065

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Morocco  
**Status::** Full Capacity  
**Given Name::** Bahija  
**Family Name::** Jallal  
**City of Residence::** Palo Alto  
**State or Province of** CA  
**Residence::**

**Country of Residence::** US  
**Street of mailing address::** 716 Garland Drive  
**City of mailing address::** Palo Alto  
**State or Province of mailing** CA  
**address::**  
**Postal or Zip Code of mailing** 94303  
**address::**

#### Correspondence Information

**Correspondence Customer Number::** 22428  
**E-Mail address::** PTOMailWashington@Foley.com

#### Representative Information

<b>Representative Customer Number::</b>	30543	
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#### Domestic Priority Information

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	An application claiming the benefit under 35 USC 119(e)	60/429,363	11/27/2002

#### Foreign Priority Information

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

## **Assignee Information**

**Assignee name::**

Sugen, Inc.